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ABSTRACT

This report summarizes four audioconferences held in the spring and summer of 1993 by the Child Care Action Coalition (CCAC) to address the implication of the Family Support Act (FSA) of 1988. The FSA was designed to reduce welfare costs by providing training, education, and child care to recipients of Aid to Families with Dependent Children (AFDC) so that they can become employed and self-sufficient. The first audioconference focused on recent FSA litigation, specifically lawsuits filed against California, Illinois, and Massachusetts to require the states to follow FSA mandates on child care provision. The second conference addressed state efforts to improve the Transitional Child Care (TCC) component of the FSA, while the third focused on current federal welfare reform initiatives under consideration by the Clinton Administration. The fourth conference looked at two state models using FSA funding in programs that provide comprehensive services to families in job programs. The names, addresses, affiliations, and telephone numbers of the audioconference speakers and participants are included. (MDM)

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Child Care Action Campaign

The Child Care Action Campaign (CCAC), a national, non-profit coalition of individuals and organizations, was formed in 1983 to respond to our nation's child care crisis. Believing that child care can no longer be viewed solely as a women's issue, CCAC has taken the lead in making quality child care both a bottom-line economic issue and a fundamental component of education reform.

CCAC's original research and groundbreaking publications are key elements in a national public education campaign to change attitudes about how our country cares for and educates its children and to provide parents, policymakers and businesses with the resources they need to both understand the problem and work for change.

CCAC's materials have helped tens of thousands of parents deal with the daunting task of recognizing and finding quality child care and advocating improvements in their communities. CCAC is at the forefront of helping small businesses establish child care assistance programs for employees, and has provided vital leadership in bringing together the public and private sectors to develop partnerships for financing quality care.

CCAC continues to affect public policy by providing cogent analysis, expert testimony and technical assistance to government leaders and policymakers on child care and family issues. CCAC's 630-member National Advisory Panel, comprised of the nation's top child care experts, advocates and practitioners is a potent force working to improve the lives of all of America's children.

CCAC

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The Family Support Act

The Family Support Act (FSA) of 1988 was the first comprehensive reform of the nation's welfare system since it was created in 1935. With state and federal funds, FSA programs are intended to reduce the costs of welfare by providing training, education and child care so that recipients of Aid to Families with Dependent Children (AFDC) become employed and self-sufficient. The Act has four key components:

- Job Opportunities and Basic Skills Program (JOBS);
- Child support and establishment of paternity;
- Supportive services; and
- Transitional services.

Under the Act, child care is viewed both as a support and a transitional service. The Act guarantees child care to families receiving AFDC if parents are employed or as they participate in JOBS and self-initiated education and training activities. In addition, the Act offers 12 months of Transitional Child Care (TCC) to cover the costs of child care for parents who leave AFDC due to increased income from employment. If these child care entitlements were implemented as intended by the Act, and if with living wages jobs were available, families on AFDC could move from welfare to work and remain in the workforce. Further, the Act would provide children with quality early childhood experiences that could lead to later acheivements and limit the likelihood that these children will become the next generation of AFDC recipients.

Unfortunately, the FSA has not reached its potential. Programs created by the Act require states or localities to match federal funds. Faced with budget defecits, many states are not allocating the funds needed to support FSA programs fully. For example, some states are capping the number of people participating in training and education programs. Other states are using child care funding sources other than those intended by the FSA, such as Child Care and Development Block Grant dollars, to support welfare-to-work activities, resulting in fewer child care dollars available for non-AFDC, working-poor parents.

As part of its mission to increase the availability of quality, affordable child care programs, CCAC established Family Support Watch (FSW), a project to monitor implementation of the FSA and ensure that eligible families have access to the quality child care guaranteed by the Act. Over the past four years, FSW has engaged in a wide range of policy analysis and advocacy activities, including issuing reports, testifying at public and Congressional hearings, writing articles and letters to newspaper editors and distributing outreach materials. In short, CCAC has tried, wherever possible, to get out the message that the child care guarantees of the FSA are a crucial component of any welfare-to-work strategy.

Family Support Act Audioconferences

Recently, FSW organized a series of audioconferences, an innovative technique of presenting information via telephone to a geographically dispersed audience. A panel of three to five experts address an issue related to welfare and child care and then respond to participant questions faxed to CCAC either before or during the telephone conference. For the cost of a long-distance phone call, participants access information presented by national experts, which would often only be available to them if they traveled to a national conference. This effort was underwritten by a grant form the Foundation for Child Development, which covered the costs of planning, telephone hookups, and distribution of materials.

The first series of four audioconferences, held in the spring and summer of 1993, looked at the shortcomings of current FSA implementation, highlighted creative state efforts to improve services for eligible families and examined the potential impact of additional federal welfare reform on child care. Topics were selected to enrich state and local administrators' and advocates' understanding of FSA's potential impact on the lives of current AFDC recipients and to educate participants about innovative implementation techniques.

The first audioconference focused on recent FSA litigation. Presenters Kathleen O'Brien of the Child Care Law Center, Dan Lesser of the Legal Assistance Foundation of Chicago, Deborah Harris of the Massachusetts Law Reform Institute, and Mark Greenberg of the Center for Law and Social Policy discussed recent litigation concerning states' interpretation of the FSA child care guarantee. Speakers explored how litigants in California, Illinois and Massachusetts successfully challenged states' attempts to limit access to FSA child care. These cases are models for advocates in seeking to expand coverage in their home states.

The second audioconference speakers, Sue Abrams from the Oregon Family Assistance Program Unit, Wanda Moore from the Tennessee JOBS Work Program, and Bill Biggs and Julie Olson from Utah's Single Parent Employment Program discussed state efforts to improve Transitional Child Care (TCC) utilization. According to the Act, after leaving AFDC due to an increase in earnings, parents are entitled to one year of TCC to help cover the costs of child care. Many barriers currently contribute to low rates of TCC utilization across the country. These include the manner and content of notification, the ease of application, the amount of the parental co-payment, the linkages to other child care subsidies and the child care payment rates. This audioconference examined state strategies to overcome these and other barriers.

The third audioconference focused on federal welfare-reform initiatives. Nancy Ebb from the Children's Defense Fund, Mark Greenberg from the Center

for Law and Social Policy, Michelle Piel from the Illinois Department of Public Aid, and Mark Ragan from the U.S. Department of Health and Human Services discussed the potential impact of a major Clinton Administration welfare reform initiative on child care. Ebb, Greenberg and Piel described how current FSA and other subsidized child care programs are currently working, and projected how a major influx of parents into education, training and the work-force would affect the demand for child care. Mark Ragan, a member of the Clinton Administration Working Group on Welfare Reform, described what a reformed welfare system could look like.

The final audioconference in this series looked at two state models using FSA funding in programs that provide comprehensive services for families in JOBS. Estelle Rubenstein and Lillian O'Brien described the interaction between Maine's ASPIRE program and the Androscoggin (Maine) Head Start program. This collaboration has resulted in Head Start facilities providing comprehensive, full-day services to a larger group of children than previously served. Alana Smart and Kathy Orth discussed the Denver Family Opportunity Program's ability to provide its participants with comprehensive services by linking with local community organizations.

It is important that states make use of all available resources to ensure that all children are receiving the highest quality child care possible. Through these audioconferences, we have attempted to bring information to child care administrators and advocates across the country to help realize that goal. The common thread running through the audioconferences is that with leadership, innovation and imagination, state child care advocates and administrators working together can achieve some of the goals of the FSA. CCAC is currently exploring possible topics for future audioconferences so we can continue to educate state administrators and advocates about the potential of the FSA, as well as other child care programs.

Audioconference 1: Recent Family Support Act Litigation
April 14, 1993

SUMMARY OF DISCUSSION

Panelists

- Kathleen O'Brien, Staff Attorney, Child Care Law Center
- Dan Lesser, Staff Attorney, Legal Assistance Foundation of Chicago
- Deborah Harris, Staff Attorney, Massachusetts Law Reform Institute
- Mark Greenberg, Center for Law and Social Policy

Overview

This audioconference focused on recent litigation on states' interpretation of the Family Support Act (FSA) child care guarantee. The FSA requires that states guarantee child care for "each individual participating in an education and training activity (including participating in a program that meets the requirements [of JOBS]) if the agency approves the activity and the individual is satisfactorily participating in that activity." Although the federal guarantee clearly extends beyond JOBS program participants, federal regulations were initially interpreted to limit the guarantee only to families in JOBS and living in areas of the state where JOBS programs were not yet implemented. In several states, advocates have challenged this interpretation by suing the states in order to expand coverage.

This audioconference brought together attorneys from California, Illinois and Massachusetts to discuss recent litigation in their states as well as Mark Greenberg, from the Center for Law and Social Policy who addressed these issues from a national perspective.

The Three Law Suits

California:

Kathleen O'Brien discussed the litigation in California, Miller v. Healy, which was the first legal challenge to the interpretation of the FSA child care guarantee. Prior to 1991, child care had only been guaranteed to participants in GAIN, the California JOBS program. In 1991, due to budgetary constraints, counties were allowed to close intake of new participants into the GAIN

program and to disenroll people already participating in the program. A number of welfare and child care advocates decided to bring suit in an attempt to enforce a guarantee of child care to a large class of people. Suit was filed in March 1991 against the U.S. Department of Health and Human Services (HHS) and the State Department of Social Services.

Several months later, the court granted a preliminary injunction that affected people who had been disenrolled from the GAIN program and, thereby, had lost child care coverage. This group, the court ruled, was now eligible for child care if they had been continuing their training on their own, since the state could not deny families child care assistance solely because they were not in the JOBS program.

Shortly after this injunction, HHS issued an Action Transmittal (AT) on child care for self-initiated training. In the AT, HHS advised states that they have a duty to provide child care to families who are not in JOBS, but who need it to participate in approved education and training activities. The AT explains that a state must have an administrative mechanism for considering on a case-by-case basis the provision of child care to individuals in self-initiated training in both JOBS and non-JOBS areas. However, the state can use "fiscal constraint" criteria when deciding to approve individuals' requests for child care, meaning that states can still limit child care for individuals in self-initiated training for budgetary reasons.

In December 1991, the court granted a summary judgment, ruling that California must provide child care for all people who are in state-approved education or training programs, whether or not they were enrolled in GAIN.

This decision led to the current debate in California — the criteria for a program to be considered state-approved. The state claims it is permissible to use a narrower definition for non-GAIN programs than for GAIN programs. This issue is still being reviewed by the court, which has temporarily adopted the position that child care need only be provided to people whose education and training programs would be approved as a self-initiated program in GAIN. In California, "self-initiated training" covers a narrower category of activities than are covered in the GAIN program.

To serve AFDC families in self-initiated training, California has developed yet another child care program, called "NET," or Non-GAIN Education and Training. Funding for NET for the first two years has come from the state's unspent Child Care and Development Block Grant allocation. There are no plans to continue to fund NET with Block Grant funds beyond the two years.

Illinois:

Following the discussion on California, **Dan Lesser** described Dubose et al v. Bradley, No. 93 C 946, a similar case in Illinois. On January 11, 1993,

Illinois closed intake into its JOBS program, "Project Chance," based on projections that it would run out of funds before the end of the fiscal year on June 30, 1993. Two weeks later, suit was brought against the Director of the Department of Public Aid by four named plaintiffs and the class of AFDC recipients who need child care to attend an education or training activity.

After a quick round of briefings, a federal district judge granted plaintiff's motion for preliminary injunction. In a lengthy written opinion, the judge ruled that the FSA guarantees child care to these plaintiffs. The judge gave no legal effect to the HHS Action Transmittal that permits states to limit the provision of child care based on "fiscal constraints." The judge instructed the Department of Public Aid to develop promptly criteria and procedures for approving child care applications by AFDC recipients in education or training activities. The state chose not to appeal the decision.

As a result of the final judgement order later entered into the litigation, the state has set up a permanent two-level program; the first level for JOBS participants and the second for recipients of non-JOBS child care assistance. Child care is approved for the same education and training activities for each group and the same approval criteria are employed. When a client requests child care to attend education and training, she is enrolled in JOBS if there is an opening for her and receives the full range of supportive services, including child care. If there is no opening in the JOBS program for her, the client is offered child care assistance only. There are no limits set on the enrollment for non-JOBS child care.

Since the state would not agree to provide notice about the availability of child care for AFDC recipients in self-initiated education and training activities other than to those clients on the waiting list for JOBS, Legal Aid attorneys and child care advocates have made considerable efforts to disseminate the information through provider networks. The case has also received significant favorable media attention.

Massachusetts:

Deborah Harris described a similar case in Massachusetts, Healy v. Gallant. Massachusetts has had a longstanding commitment to education and training, and child care, in part owing to the programs implemented under former Governor Dukakis. However, the present administration has initiated cuts for child care both for AFDC recipients and for non-recipients. In December 1992, the state projected insufficient funds to offer child care to all eligible participants in the JOBS program and closed entry into the state's JOBS program.

Suit was brought against the state in an effort to ensure payments for those who needed child care. In Massachusetts, the basis for the suit was somewhat different from California and Illinois because the state had always

approved self-initiated training and education as part of the JOBS program. Therefore, the entire waiting list for child care was composed of persons in approved programs.

The court granted an injunction against the state that was later affirmed by the state's highest court.

Issues and Implications

Mark Greenberg assessed the actual extent of the FSA child care guarantee in light of recent litigation. He noted that the common thread of these three cases seemed to be a compelling argument that the child care guarantee of the FSA cannot be limited to JOBS participants. This guarantee applies to other AFDC recipients in approved education and training programs as well.

One must, however, also keep in mind other litigation in which there have been negative decisions. For example, in Florida's Maynard v. Williams, a preliminary injunction was denied, with the court holding that the child care guarantee only pertains to people required to participate in JOBS. This decision is actually more narrow than HHS's own Action Transmittal and regulations. Additionally, in Maine's Barnett v. Commissioner of the Department of Human Services, the court found that fiscal restraints were indeed a permissible basis for denying child care.

Although the narrow holdings of these two cases differ greatly from the suits in Illinois, California and Massachusetts, they should not be ignored. While the reasoning of the cases ruling favorably is much more extensive, and in many respects more persuasive, the fact remains that the courts have not been unanimous. As a result, it seems likely that there will be no clear mandate on the status of the child care guarantee until HHS issues further guidelines.

Throughout the discussion, panelists discussed implications of these cases, which are summarized below.

Effects of the litigation on other states. It is unclear how states have responded to the litigation, especially given the confusion surrounding the Action Transmittal. Currently, there are no comprehensive data available. According to the 1992 state plans, we do know that 40 jurisdictions are using the JOBS criteria for non-JOBS AFDC recipients who need child care.

Implications in the current political climate. When the FSA was being debated in 1988, advocates were worried that there would be significant litigation to protect individuals who failed to participate in JOBS from being sanctioned. Instead, the litigation has been about opening up the programs for everyone who wants to participate. This is an important message to be

conveyed in the current welfare reform debate, which has not focused on the fact that fiscal constraints — and lack of child care — have limited the effectiveness of JOBS programs, not the lack of will of AFDC recipients to participate. Advocates need to organize to prevent the elimination of subsistence AFDC benefits necessary for children's survival, given that education and training, child care and other family supports are inadequate or nonexistent for many families.

Potential budget implications. Several audioconference participants expressed concern that one of the effects of ensuring that the FSA child care guarantee extends to participants in self-initiated education and training would be to divert funding from other child care subsidies, including state-only funding and Child Care and Development Block Grant funds to AFDC-linked child care programs. Others were concerned that states would offset the new expenditures by decreasing payment rates for all child care and/or by decreasing the level of education and training offered in JOBS. Panelists acknowledged that all of these concerns were legitimate and that advocates must work to ensure they do not happen. An important point is that there is an artificial distinction drawn by funding streams between the working poor and AFDC recipients that does not correspond to people's lives. Advocates must work directly with legislators, governors and the general public to build support for expanding child care funding.

Audioconference 2: State Efforts to Improve TCC Utilization
May 19, 1993

SUMMARY OF DISCUSSION

Panelists

- Sue Abrams, Family Assistance Program Unit, Income Maintenance Section, Oregon Department of Human Resources
- Wanda Moore, Director, JOBS Work, Tennessee Department of Human Services
- Bill Biggs and Julie Olson, Single Parent Employment Program and Jerry Jones, Single Parent Employment Program, Utah Department of Human Services

Overview

The second of CCAC's audioconference series on FSA child care highlighted three states' efforts to increase utilization of Transitional Child Care (TCC). With the passage of the FSA, families who become ineligible for Aid to Families with Dependent Children (AFDC) due to increased earnings are entitled to up to one year of TCC to help pay for child care. By April 1990, all states had begun to implement TCC.

Despite mounting evidence documenting the importance of TCC to ease the transition between welfare and work, utilization of the entitlement has been very low. The U.S. General Accounting Office (GAO) reported that in the 20 states where it was able to calculate a rough estimate of TCC utilization, only 20 percent of eligible families received the benefit in 1991.

Even though TCC utilization data are incomplete, there is consensus on some of the reasons why so few families are receiving the subsidy. In their responses to the GAO study, state administrators identified several important barriers to TCC utilization, including: 1) point in time families are notified that TCC is available to them (e.g., upon entering education and training programs, when earnings are first reported); 2) method by which families are informed; 3) complexity of the application process; and 4) amount of the co-payment.

This audioconference brought together state child care administrators from Oregon, Tennessee and Utah, who described their efforts to overcome these barriers and increase TCC utilization.

Oregon: Incorporating TCC into a Seamless Program of Child Care

Sue Abrams explained that since 1981, Oregon has had a child care subsidy program for low-income families, the Employment Related Day Care Program (ERDC), which has been administered by the Department of Adult and Family Services (AFS). When TCC was implemented in 1990, AFS modified the existing program so that it would serve both families who were and were not eligible for TCC. AFS raised reimbursement rates in response to the required market-rate survey. The only other major change was to pay providers directly instead of reimbursing families for the cost of care, as was done previously.

Because there are now several other important federal child care funding streams, Oregon is attempting to integrate its subsidy programs and, at the same time, implement improvements to make the child care assistance more responsive to parents' and providers' needs. The state has expanded ERDC to provide assistance to a broader range of low-income working and student parents at four pilot sites. If proven successful, the program may be implemented statewide in July 1993.

The program initiative allows TCC recipients to continue to receive child care assistance as their employment and income situations change. Provider agreements, parental co-payments, payment rates and the payment process will be the same, regardless of the federal funding source. Only at the AFS administrative level will the program and funding sources be separated.

Application. The TCC application process in Oregon is very simple — an application is sent to AFDC recipients with their case-closing notice. (Because TCC information is presented at the AFDC intake interview, many clients have already heard about TCC prior to receiving their application form.) A parent who wishes to receive TCC only has to sign and return the form; all of the other information is on file at AFS. If for some reason families do not access TCC through AFS, they also may apply for benefits through local resource and referral agencies in many counties.

Payments to providers. Based on the results of a market rate survey, AFS developed approximately 20 different rates for each of five geographic regions, depending on type of child care and the number of hours provided. These rates are significantly higher than before the survey. In order to receive payment, the provider must be listed on the state's system and must meet specific health and safety requirements. Payments are now sent to providers within one or two days of billing.

The new payment system is viewed very positively by both providers and parents. Previously, the family's co-payment was calculated on a monthly basis and frequently changed. This calculation took at least six weeks to process, delaying payments to providers. Providers often received a different

amount each month from the state and, in turn, would have to adjust the amount that they asked families to pay.

Parental co-payments. Instead of calculating a co-payment on a monthly basis, the family's co-payment is established in an up-front agreement with the parent and provider. The billing form identifies the family's amount of co-payment and all of the children who are eligible for care.

TCC utilization. In March 1993, 1,600 people were using TCC state-wide. This represents 31 percent of the 5,100 families who are receiving child care subsidies in the expanded seamless program. Although no formal figures have been determined, the state estimates that this represents close to 100 percent of the population eligible for TCC in Oregon.

Registered care. Before the pilot was implemented, 20 percent of families used registered and certified care; now approximately 50 percent of families use these forms of care.

Child care assistance for working AFDC families. The 3,700 families who are working but are still eligible for AFDC are one group who have benefited significantly from Oregon's pilot program. Oregon estimates that half of these families need child care assistance. Previously, working AFDC recipients could only receive the AFDC child care disregard, an AFDC benefit calculation in which either $175 or $200 (depending on age of the child) is not counted as income if the family is paying at least that much for its child care. Under the pilot program, working AFDC families receive the same level of child care assistance (and providers are paid directly) as do other families in the expanded ERDC program. This represents a child care payment increase of 150 percent over the child care disregard levels.

Tennessee: Using Broker Agencies to Do Outreach

Wanda Moore explained that Tennessee also endeavors to have a seamless, integrated service system for all the child care funding streams. The Department of Human Services (DHS) administers the child care programs, using the same payment rates and fee schedules. A child care committee in DHS coordinates all child care policy, automation and fiscal decisions. The state attempts to maximize its use of uncapped entitlements by ensuring that the state charges the FSA funding stream for all clients who are eligible for FSA child care. Tennessee will begin drawing down its At-Risk Child Care funds for the first time this July.

Broker agencies. All subsidized care in Tennessee is administered by 15 child care broker agencies who were selected through a competitive bidding process. Broker agencies provide every service for the family except for the determination of eligibility for FSA child care assistance. These agencies issue child care vouchers to parents, ensure that health and safety requirements are

in place, monitor unregulated providers, monitor attendance and manage invoices for providers. Broker agencies also manage waiting lists, train providers and provide outreach and educational programs in their communities. Whenever possible, broker agencies ensure continuous care so that as clients move through funding streams, they can continue to get care for as long as they are eligible.

The broker agencies, primarily composed of community action, social service and human resource agencies, cover every county in Tennessee — in some cases by having a staff member travel to a rural area for a period of time every week. Many also have toll-free numbers.

TCC eligibility determination. In other states, many working families' cases are closed because of clients' failure to report monthly income, which often means that they never hear about TCC. Tennessee does not require clients to report monthly; therefore, no cases are closed or benefits are lost for this reason. Instead, all eligibility determinations are made by eligibility counselors at the point when an AFDC case is closed.

Outreach. All clients receiving closure notices are informed that they may be eligible for child care and given the name, address and telephone number of the appropriate broker agency to contact. If a parent does not contact the broker within a few days of receiving the notice, the broker is required to follow up and initiate contact, either by telephone or mail. A phone call from the broker is helpful in explaining TCC eligibility, especially when one considers the large amount of paperwork an AFDC recipient receives.

Application. In Tennessee, no written application is necessary; the client need only contact the broker agency and can do so by phone.

TCC utilization. From July to December 1992, the TCC utilization rate increased 38 percent, reaching 3,429 participants by March 1993, and is still growing. The eligible pool of TCC recipients is lower than in some other states because of the fact that there are many working families in Tennessee who are still eligible for AFDC benefits and therefore are receiving other child care assistance.[1] (Working AFDC recipients can choose to use the child care disregard or have their child care paid for directly.)

Type of child care used. Approximately 79 percent of TCC recipients use center-based care and 14 percent use unregulated care. Moore believes that brokers have been instrumental in raising the quality of care and helping AFDC recipients realize "that regulated care is remarkably better for their

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[1]Fifteen percent of Tennessee's AFDC population are employed (about 15,000 families) and around half of these families are receiving child care. This means that there are more than twice as many AFDC recipients receiving child care as there are TCC recipients.

children." (Child care brokers receive between three and 10 percent of the child care payment rate for administrative fees.)

The increase in child care funding in Tennessee has resulted in the growth of regulated care. Tennessee has also made an effort to increase the number of registered homes that could receive the higher child care payment rate for regulated care. However, there is still a problem with regulated care during evenings and weekends when a large number of TCC recipients, who often work non-traditional hours, need child care.

Payment rates. As a result of the last market-rate survey, payment rates will go up 10 to 14 percent in July 1993. Ms. Moore credited DHS with doing a successful job of educating the general public about the need for child care, which played a role in the state's General Assembly improving the rate increase.

Utah: Using Federal Waivers to Improve Transitional Child Care

Bill Biggs, Julie Olson and Jerry Jones informed audioconference participants that Utah has applied for and received federal waivers to implement changes in TCC as part of its Single Parent Employment Program. This program has three basic purposes: change AFDC into an employment program; increase net family income; and make programs supporting public assistance recipients, including cash grants, education and training, food stamps, Medicaid and child care, work together to support employment. The demonstration program, implemented in three sites, is a mandatory work program. Utah increases grants an additional $40 per month for participants and deducts $100 from grants of those families who do not participate. Presently, 98 percent of public assistance recipients in the three sites are participating in the program.

TCC is administered out of the same office as the other assistance programs. This "one-stop" program co-location helps clients eliminate job absences due to multiple service appointments.

TCC requirements waived. Utah's demonstration program eliminates several federal program requirements perceived as barriers to making TCC effectively serve families who leave AFDC to work.

- To get TCC, families no longer must receive AFDC in three of the last six months prior to becoming ineligible for AFDC. The Diversion Program, implemented as part of the demonstration, allows clients to receive one-time financial assistance and still get TCC.
- Employed families are eligible for TCC if they leave AFDC for any reason.
- No application for TCC is required.

- Families do not have to contribute a co-payment even if their income is above the poverty line. In fact, Utah's demonstration program does not require a co-payment for the first two months of TCC regardless of families' income levels

Effects of the Demonstration. Child care utilization in the demonstration sites has increased, but no exact figures are available at this time. Clients have been positive about the simplicity of applying for and receiving the benefits.

Statewide policies provide seamless care. Utah has taken steps to make TCC more accessible in areas where the Utah Single Parent Employment Program has not been implemented. TCC is a component of Utah's seamless child care program. Eligible families only need to make a verbal request for the benefit, and the state encourages income support staff to use income information already available in the local office to make eligibility determinations whenever possible. Utah also provides information on TCC and other available child care benefits periodically in a newsletter mailed to all AFDC and Medicaid recipients.

Recommendations

In a question-and-answer period, panelists discussed recommendations for other state programs and possible solutions to various TCC problems.

Seamless Programs. All of the states represented urged that a seamless child care system be created. All child care should be coordinated from the same location, regardless of the funding stream, to help ensure continuity of care as families leave TCC. All child care funding streams should look the same, both to the client and the provider, to encourage higher usage rates. Child care assistance for all families on AFDC, including those who are employed or in education and training activities, should be uniform and correspond to the other child care subsidy programs.

Public Awareness. If public assistance recipients understood that child care assistance is available to them, more families would use FSA child care. Public education about the importance of quality child care to enable low-income families to become self-sufficient generates public support and makes it possible for states to implement more comprehensive child care policies. Resource and referral and other community organizations can be instrumental in these efforts and can provide an excellent source of technical assistance, both to families and providers.

Access. Eliminating a written application, or simplifying the application process as much as possible, can lead to increased usage of TCC. TCC application systems should emphasize human contact and individual approaches to meet families' needs. There should be periodic and concerted follow-up after

families have been informed that they are eligible for the benefit. In states where funding is not "seamless," families should also be contacted near the end of the 12-month period so they can take the necessary steps to ensure that they can receive additional subsidy assistance.

Payment rates. State reimbursement rates should reflect the cost of care, and payment mechanisms should be responsive so that providers can be paid quickly.

Parental co-payment. The parental co-payment should not be burdensome. The federal government should eliminate the requirement that all families receiving TCC, regardless of income, must pay a fee.

Utilization. In some states, families who are eligible for TCC may be receiving other forms of child care assistance so that the state is not maximizing its use of uncapped federal child care dollars. One reason is that in many states, TCC is more difficult to administer and use than other subsidy programs, such as Title XX funds or the Child Care and Development Block Grant. States should work to eliminate this problem.

Audioconference 3: Federal Welfare Reform Initiatives
July 14, 1993

SUMMARY OF DISCUSSION

Panelists

- Nancy Ebb, Senior Staff Attorney, Children's Defense Fund
- Mark Greenberg, Senior Staff Attorney, Center for Law and Social Policy
- Michelle Piel, Manager, Child Care And Development, Illinois Department of Public Aid, Division of Family Support Services
- Mark Ragan, Executive Assistant to the Assistant Secretary, U.S. Department of Health and Human Services

Overview

The third in CCAC's audioconference series on FSA child care focused on the impact of the Clinton Administration's welfare-reform proposals on child care. A major initiative, welfare reform is certain to have a dramatic effect on the demand for child care. With an influx of current AFDC recipients into training programs, the workforce and public service positions, many more families will need care. The question that arises is how, and to what extent, the Administration intends to address this need.

This audioconference brought together two national child care and welfare advocates, a state child care administrator and an assistant to a member of the Administration's Working Group on Welfare Reform, Family Support and Independence to discuss the impact of welfare reform on child care.

The Current System: Strengths, Weaknesses, Implications

Nancy Ebb described child care under the current welfare system, the starting point for any discussion of welfare reform. FSA child care programs have both strengths and weaknesses that need to be examined to determine what changes are needed and which programs should be expanded. In March, the Children's Defense Fund interviewed selected state child care administrators to develop a picture of how current subsidized child care programs are working.

On the positive side, current child care programs are supporting AFDC clients participating in education, employment and training. Federal expenditures to match state child care expenses have increased from $253 million in FY 1991 to $349 million in FY 1992. Almost all states reported an increasing

demand for FSA child care. For example, over the next two years, Florida projected a growth of 50 percent for AFDC families needing child care to engage in employment, education and training and Transitional Child Care (TCC).

In most states, however, the steady growth in spending is falling far short of the increase in child care needs of AFDC recipients. Federal child care expenditures have increased by 38 percent in the same period of time that JOBS participation rates increased by 57 percent, clearly indicating that child care subsidies are inadequate for families in employment and training activities.

Even more alarming, in some states, expenditures for child care have actually decreased. For instance, in Pennsylvania, the federal share of expenditures for FSA child care dropped from $19.1 million in FY 1991 to $14.2 million in 1992. In Massachusetts, federal matching funds dropped from $17.3 million to $11.5 million. Because of current fiscal constraints, many states are trying to limit access to federal child care programs to reduce state spending. Some states have acted in ways that are inappropriate and, in some cases, illegal.

States have been forced to deal with the overwhelming demand for subsidized child care by pitting the needs of AFDC recipients for child care against non-AFDC working poor. By using the Child Care and Development Block Grant (CCDBG) to pay for AFDC Child Care and TCC, these states are reducing child care subsidies available to non-AFDC working poor families. In a period when many states already have substantial waiting lists for block grant child care assistance, this funding diversion is disturbing.

To meet the state matching requirements for FSA child care, other states are reallocating state funds originally intended for other forms of child care. States are using child care funds to draw down federal AFDC child care dollars that could instead be used as the state match for the At-Risk child care program, which is targeted to families in danger of becoming dependent on AFDC if they do not receive such assistance.

Currently, working families on AFDC are frequently relegated to using the AFDC child care disregard, which in the overwhelming majority of cases, is the form of reimbursement least likely to help the family obtain good child care. (This benefit works as follows: either $175 or $200, depending on the age of the child, is not counted as income for purposes of calculating the family's AFDC grant if the family is paying at least that much for child care.) Retrospective payment and reimbursement to parents through the disregard severely limit parent options and access to care. Parents have to pay out of their own pockets and wait one to two months to be reimbursed by the states. In many states, the disregard pays less for child care than the state would otherwise pay for IV-A child care. In addition, providers are more reluctant to

serve AFDC children because they cannot count on being paid in a timely fashion.

For families struggling to make it off welfare, this level of assistance is pitifully inadequate. To support a successful move from welfare to work, adequate child care assistance paid in a timely fashion must be provided to all low-income families participating in any education, training or employment activities, regardless of AFDC status.

If states cannot come up with the resources to meet the current demand for child care, they will certainly face enormous barriers to meeting the increased demand for child care assistance resulting from a substantial revision of the welfare system. To maximize current and future participation in training, education and employment programs, the federal government will have to revise federal matching rates, reducing or even eliminating state matching requirements. Federal welfare-reform efforts must ensure increased demand is not accommodated at the expense of non-AFDC working poor.

The Administration's Reform Package: Goals and Priorities

Mark Greenberg discussed the Clinton Administration's priorities for welfare reform. He emphasized that many details of the Administration's proposal are yet to be resolved.

The Administration's work group on welfare reform will be working according to four guidelines set by the President:

1) making work pay;
2) dramatically improving child support enforcement;
3) providing education and training and other support services to help people get off and stay off welfare; and
4) creating a time-limited transitional support system followed by work.

These guidelines could have a direct effect upon the demand for child care.

First, the concept of making work pay suggests that a family that works should not be poor. The Administration does not specify whether a working family should receive child care assistance; however, child care costs represent a significant portion of a low-income family's disposable income. Work does not pay if child care consumes all of a family's disposable income. The welfare-reform proposal must address this central question.

It is hard to determine the size of the child care system needed because it is unclear how large an education and training initiative will be proposed. It seems likely that the final program will be an expansion of the Job Opportunity and Basic Skills (JOBS) program or something that resembles JOBS. In such a program, a family will receive AFDC assistance during the first two

years followed by a work obligation. Whatever the specifics, the result will be an increase in the need for child care.

To get some idea of the potential impact, we can look at the current system, in which the best estimates indicate that 15 percent of AFDC families are involved in JOBS programs, one-third of whom are receiving child care. If the JOBS program were expanded to reach half of the AFDC population, the demand for child care for AFDC families would at least triple. If program activities were made more intensive, with longer program hours and increased participation for parents with younger children, the increase in child care demand would be even greater.

After the two-year welfare time limit, when work obligations will be generally imposed, there will be another enormous increase in the need for child care. Approximately 3 million families currently on AFDC have already reached this two-year point. Even with numerous exemptions, it seems likely that if there are 1.5 million work program participants, there will be at a minimum a need for 500,000 new child care slots, an enormous burden on the child care system, causing a real push for expansion.

There are a number of unresolved questions before we can determine what such a demand for expansion will mean. Will families who are participating in training, education and employment activities receive child care assistance? What kind of care will be provided? Who will pay for it?

A substantial expansion of AFDC child care makes questions concerning the nature of care in the system (e.g., how the new system will address the issues of parental choice, access to quality care and cost implications) much larger issues. Particularly when there are long waiting lists now for non-AFDC care, the politics of putting sizable resources into an expansion of AFDC care becomes problematic. It is poor public policy to create a system where families that are working cannot access child care, but by entering the AFDC system, families can work off grants with assured child care. An equitable division of resources between AFDC and non-AFDC families is a critical issue in welfare-reform deliberations.

The final question that must be addressed is how to balance federal and state expenditures for this new child care system. Many states express concerns under the current JOBS program that existing match rates are too high and contend that increased federal expenditures are needed. In the new system, will there be any state match at all and, if so, are states going to be willing to meet the matches required? If current patterns are any indication of the future, further CCDBG funds may be diverted to meet state AFDC child care needs. A number of governors have already discussed the idea of moving towards a system of two years of welfare benefits followed, with few exemptions, by work. Clearly, child care costs of such a system should be a major consideration. Further, we cannot loose sight of the effects of early childhood

environments upon children. Quality early childhood education can have life-long benefits and can mean the difference between a succesful adulthood or another generation of welfare dependancy.

Implications on the State and Local Level

Michelle Piel discussed the current AFDC child care programs and implications of welfare reform from the perspective of a state administrator. How to pay and who will pay for reform efforts are central issues.

For each state, a different set of circumstances surrounded implementation of the FSA. Some states already had programs in place and were using Title XX, state revenues or other programs to subsidize child care for AFDC families and/or the working poor. These historical state spending patterns should be taken into consideration when discussing the implementation of any reform package.

Child care under the welfare reform package also needs to be tailored to the child care available in each state. For example, child care assistance based on hourly rates will not work in states when part-day or full-day care are the only options. States will have to look at what is available to purchase in deciding how to subsidize care.

Further, any discussion of changing the states' child care programs should focus on children. In the last few years, most of the welfare-reform discussions have centered around their mothers. Children need to receive quality child care when away from their parents. When the focus is on children's needs, states may avoid perpetuating current problems, such as providing children whose care is paid for by FSA with a different quality of care than children with care paid for by CCDBG. All child care, regardless of the funding stream, should be of equally high quality.

Programs should also acknowledge that a family's move from welfare to work is a gradual process. An Illinois study of 7,000 AFDC and former AFDC clients demonstrated that there is no single moment when a family leaps from dependency to self-sufficiency. Families who have newly entered the labor force often move between employment and unemployment a number of times, finding themselves loosely attached to the labor force before attaining self-sufficiency. Welfare reform should address these patterns, ensuring that FSA child care is reasonably related to a mother's activities no matter what they are, and recognizing that her activities are constantly changing during this period. Although funding streams may vary with the changes in her life, the child's care should remain consistent. States must find a mechanism to ensure that children can remain in a stable situation that enables parents to look for another job when out of work, so parents do not have to find care all over again when they return to the workforce.

Payment mechanisms also convey important messages to the recipients. For example, clients who use the child care disregard will be reimbursed for $175 to $200, which they first pay out of their pockets when they are working but still poor enough to be eligible for AFDC. From these early negative experiences with child care, recipients may be left with a strong message that the price they have to pay for child care is unaffordable, the child care system is hopelessly complicated and more of a barrier to work than a help. In November, Illinois will begin directing payments directly to providers, rather than forcing clients to deal with this tangled web of reimbursements.

Welfare reformers must also consider the lack of infrastructure for child care programs. Even if states had the money to expand child care substantially, the currently existing infrastructure cannot sustain such an expansion. There are not enough providers, especially of center-based care. There is also a shortage of evening and weekend care. In addition, child care programs suffer from high staff-turnover rates and underpaid staff.

When we undertake welfare reform, we have to keep the overall goal of universally available, affordable, quality care for all families who need it in mind. We know what children need and have to ensure that any reform moves in that direction.

The Administration's Considerations

According to Mark Ragan, the Administration is concerned about two major issues in its discussion of new child care policies: one, the shifting of existing child care funds from the non-AFDC population to AFDC recipients and two, assessing the potential costs of child care. Ragan reiterated that the Administration is far from resolving these problems and is still open to suggestions.

To meet the goal of making work pay, the working group has yet to establish a target population in terms of family income. In the past, the focus has been on AFDC recipients. But if the goal is to revise the welfare system substantially, a change in the current target population may be necessary in order to include people threatened with becoming dependent on AFDC. This will increase costs of providing child care and other supportive services.

One of the major difficulties in addressing the child care needs of the non-AFDC working poor is the cost implications. Although it recognizes that as a matter of policy we do not want a system in which a parent's child care entitlement is tied to AFDC, or is time-limited, the Administration knows there will not be enough money to address all needs.

Part of the difficulty in defining the problems in the current system lies in quantification. The size of the unmet demand for child care, and the degree to which we are able to generalize from state to state about what this demand

looks like, needs to be determined. The Administration also lacks estimates of the extent to which states are using CCDBG monies to pay for child care for AFDC recipients. These data could play a key role in determining whether it would be more advisable to amend current programs or create new ones.

The Administration is aware of the problems with some of the specific child care programs, such as the AFDC child care disregard. In any discussion of eliminating the disregard to correct the relative inequities among different programs, the Administration must consider those families who currently use the disregard. If they became ineligible for AFDC without it, they would no longer have access to health care, or would be subject to the one-year time limit for Transitional Medicaid Assistance. Ragan emphasized that the Administration has no expectations for people to participate in activities without appropriate support services.

The Administration must also analyze the inter-relationships among current child care programs. For example, the Working Group on Welfare Reform is looking at Head Start expansion as it relates to child care, and seeking to coordinate expansion with welfare reform. Another subgroup is attempting to identify differences among child care programs and the barriers to coordination that exist at the local service-delivery level. Utilizing Head Start and other existing child care programs to help meet the need for care in an expanded, subsidized system is an obvious first step.

The Role of Advocates

The public support for welfare reform is based on a sense that too much money is being spent on welfare now, and we need to change the system in order to save money. Consequently, the centerpiece of the discussion for many in Congress will be what happens to a client after two years and what types of work requirements are involved. Although children's needs should not be overlooked, advocates are concerned that the issue of quality care may be disregarded when the cost question comes up.

In contrast, advocates agree that to address the child care needs of even the current AFDC population, there is a substantial new cost involved. Advocates can play a key role in educating the public and members of Congress that child care and other supportive services, although more expensive in the short run, are ultimately crucial investments in the existing or new welfare system.

State administrators and advocates can also inform the Working Group on Welfare Reform and Congress of their experiences with current FSA child care and welfare-to-work programs. In the absence of good data, policymakers could assume that child care needs and costs are trivial, rather than a critical component of any welfare-reform discussion.

Audioconference 4: Using Family Support Act Funding for Comprehensive Services

SUMMARY OF DISCUSSION

Panelists

- Estelle Rubenstein, Executive Director of Androscoggin Head Start and Lillian O'Brien, Regional Manager, ASPIRE, Androscoggin, Maine
- Alana Smart, Program Consultant, Denver Family Opportunities Program, Denver Department of Social Services, Denver, Colorado and Kathy Orth, Child Care Supervisor, Child Care Services, Self-Sufficiency Division, Denver Department of Social Services, Denver, Colorado
- Anne W. Mitchell, Early Childhood Program Consultant

Overview

The fourth of CCAC's audioconference series on FSA child care focused on programs that provide comprehensive services to families enrolled in the Job Opportunities and Basic Skills (JOBS) program. Based on extensive research, child care advocates are convinced that FSA child care funds alone are insufficient to provide the type of quality, flexible child care arrangement needed to support a family's move from welfare to work.

Many states and communities across the country have developed innovative ways to address the shortage of funds by creatively combining FSA dollars with other funding sources, or by forging partnerships with other organizations to provide additional services. For this audioconference, we have highlighted two innovative programs.

Androscoggin, Maine: Expanding Head Start Services to All JOBS Children

Estelle Rubenstein and **Lillian O'Brien** described how Androscoggin County, Maine, has expanded its Head Start program to serve all children of families enrolled in the Additional Support Program for Individuals Seeking Retraining and Education (ASPIRE). Using a combination of Head Start, FSA, United Way, Title XX and Community Development Block Grant funds, children of ASPIRE participants are now receiving a full day of Head Start, including all of the comprehensive services that accompany Head Start.

ASPIRE and Head Start collaborated to meet the governor's goal of reducing welfare dependency by providing comprehensive services to families. As Head Start is traditionally a half-day program, the facilities were vacant in the afternoon. To provide full-day services, only two additional staff persons were needed to cover the afternoon session. Twenty ASPIRE families are

currently enrolled in Androscoggin Head Start, and the center now has a classroom set aside specifically for serving ASPIRE children. Between its Head Start and child care programs, Androscoggin accepts children from six weeks to four years of age, enabling families with preschool children to use a single program and providing some continuity of care for children as they grow.

ASPIRE caseworkers and Head Start staff work closely together to provide comprehensive services to meet the ASPIRE participants' needs, especially at points when parents are failing to fulfill their education and training obligations. ASPIRE caseworkers refer parents to the Androscoggin program, whereupon caseworkers visit each child in the classroom and meet with parents at the Head Start center. If additional social services are needed, Head Start will refer ASPIRE parents to other community services. When the school year ends, Head Start updates the ASPIRE caseworker about the family situation.

The coordination between ASPIRE and Head Start staff is fostered by the numerous opportunities for interaction between the two staffs and parents. Before the school year begins, the two staffs meet to discuss the role of the Head Start program. ASPIRE caseworkers' visits to the classroom not only encourage a positive relationship between the agencies but allow caseworkers to discuss classroom activities when they meet with parents. Caseworkers are also more comfortable bringing parents to the center because it is familiar territory for them.

Parents first learn about the child care component of ASPIRE options such as Head Start and family day care homes — at a group orientation. As — they look for care for their children, parents visit potential sites. Because the caseworkers are so familiar with care options, they reinforce the importance of quality care for clients.

Head Start makes an effort to reach out to the community to provide comprehensive services to parents. All ASPIRE parents can take advantage of the services provided for Head Start parents, such as workshops on parenting, nutrition and non-traditional jobs. Every Head Start child enrolled in Androscoggin has a complete speech, hearing and vision screening, and dental and health exams. Head Start funds pay for these services for Head Start children; the services for other children are covered by a combination of funds, such as United Way, At Risk and some local sources.

After completing the ASPIRE program and becoming employed, some families may still use Androscoggin before- and after-school child care programs, both run on a sliding-fee scale. Few families in Maine use Transitional Child Care (TCC), in part because with TCC, the state reimburses parents <u>after</u> they pay for care. Many parents who have recently entered the workforce find these outlays burdensome and prefer that subsidy programs

pay providers directly. Maine may look into other ways to pay for TCC to allow more families to take advantage of the program.

Denver, Colorado: Child Care as Part of an Integrated Welfare-to-Work Program

Alana Smart and Kathy Orth discussed the Denver Family Opportunity Program (DFO), a JOBS program that uses child care funding from federal JOBS child care, TCC and a Colorado program called the Colorado Child Care Assistance Program.

Colorado has had a child care assistance program since the early 1970s. Until 1990, child care was administered through a casework-intervention type of program, where each caseworker assisted from 80 to 100 clients, and child care was one component of a program designed to help clients achieve economic independence.

DFO was implemented in 1989, based on the findings from a questionnaire sent to state social services staff, clients, administrators and directors of community organizations. People were asked, "If you wanted to achieve welfare reform and assist families in achieving self-sufficiency, what would that program look like?" DFO was modeled after their responses.

In 1990, DFO formally became a JOBS program. Currently, the program serves approximately 1,200 Denver County families with 25 case managers, using a case-management approach. Caseworkers handle approximately 60 families. Each family also works with an eligibility technician.

The program provides clients with literacy and vocational assessment, career planning and referral to education and training programs. DFO has also developed some specialized career tracks in the area of health, micro-enterprise and non-traditional careers. Although education and training are the key components of the program, DFO recognizes that unless other issues affecting the client's life are addressed, such as housing or mental health issues, that client will not be able to move successfully from welfare to work. Other support services to clients include child care, transportation and some assistance to defray school expenses.

With At-Risk and Child Care and Development Block Grant (CCDBG) monies, more children are now receiving child care through DFO. The larger number of clients moving through the system has changed the child care arm of the program somewhat. In the former model, all caseworkers worked with families to move toward an economic goal, and child care was viewed as one means of reaching that end. Now the child care unit serves much less of a social service role, and acts as a separate, and primarily payment-assistance-unit.

DFO is dedicated to a two-generation strategy that seeks to promote the optimal development of the children in the program. In 1992, DFO spent over $2 million on child care, with over 80 percent of the children in licensed care. Parents can use exempt care, but caseworkers stress informed parental choice. Parents are encouraged to be "fussy consumers" of child care. During the orientation process, a considerable amount of time is spent discussing quality care. Parents are shown a videotape about quality child care and then work with case managers in developing a child care plan that they bring to a local resource and referral agency.

The resource and referral agency serves providers as well as parents to ensure quality care. Providers work through an intensive training program and can take advantage of an assistance line for advice and information. Resource and Referral agencies also check for TCC eligibility through their intake process and work with clients to meet each family's special needs.

While the client attends meetings at DFO, children can stay at Good Beginnings, the on-site child care center at the department. A Montessori program, the drop-in center fulfills a dual role of caring for children so parents can give their full attention to meetings with caseworkers and providing parents with an example of what quality care looks like. Currently funded by a combination of JOBS, CCDBG and state funds, the program was originally started with assistance from the Junior League and other sources of private and state funds.

DFO has also developed partnerships in the community to address the need for comprehensive services at little or no cost to the state. This strategy of leveraging dollars allows DFO to offer services that would ordinarily be too expensive to purchase. One example of such a partnership is developmental screenings. DFO found parents apprehensive about developmental screenings so a video describing the process was developed for use during orientation. An organization called the Interagency Collaboration Team comes to the child care center once every quarter to provide on-site developmental screenings. In return for this service, DFO promotes their community-based developmental screening services.

Unfortunately, even after making use of other means of providing services, Colorado does not reimburse parents at 75 percent of the market rate for care. Providers are now applying pressure on the state to increase payment rates and, in some cases, refuse to accept any more referrals, particularly for infant and toddler slots. The state faces the dilemma of serving more parents poorly or fewer parents well. In the past, it has chosen to serve more parents, but may change in the near future because of provider pressure.

After parents complete education and training and move into the workplace, they enter the TCC assistance program. Denver has been struggling with many TCC issues. First, because TCC eligibility levels are so low, many

parents are at or above the income ceiling for TCC, 150 percent of poverty level, before they even receive their first payment. Second, Denver has opted for a monthly reporting system for TCC eligibility. For many clients, this close surveillance makes them feel as if they have never left AFDC. Further, this creates budgeting problems for clients with child care assistance fluctuating every month along with their income. Also, reimbursement rates have not been updated since 1968. A state committee is currently meeting to eliminate some of these barriers.

Child care organizing and advocacy are on the increase in Colorado. Denver County sponsors an annual forum on child care that gives providers an opportunity to learn about new child care developments. The Denver Mayor's Office on Child Initiatives provides a local focus for children's issues. On the state level, the Child Care Coalition of Colorado is looking into hiring a lobbyist.

Some barriers, however, come from the federal level, and cannot be fixed except at that level. For instance, federal legislation mandates that exempt providers be reimbursed at the same rate as licensed providers, removing much of the incentive for providers to become licensed in the first place. In addition, the federal government now mandates only two payment rates, aside from rates for special needs children. Before this took effect, Colorado had a range of reimbursement rates that corresponded with licensing requirements. The new set of rates are much less comprehensive and do not match the actual cost of child care as closely.

Conclusion

These two programs are examples of communities using innovative techniques to provide comprehensive services to families trying to leave AFDC. Both states make creative use of existing resources to bring much-needed services to program participants and maintain open lines of communication between child care and income support staff, resulting in an understanding among income support staff of the need for high quality care. Other states should reexamine the way they are administering programs to make the best use of existing resources and bring the highest quality care possible to families leaving AFDC.

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Bernice Weissbourd
Family Focus, Inc.

Edward Zigler, Ph.D.
Yale University, Bush Center

PUBLICATIONS

Where They Stand: A Digest of Organizational Policies on Child Care and Education

A comprehensive guide for policymakers and advocates to 45 national organizations' policy positions on quality child care, early childhood education and education reform. Highlights the common ground and differences among organizations' approaches and the need for more collaboration. (1993) ☐ $25 non-member ☐ $15 member

Building Links: Developer Initiatives for Financing Child Care

The second of a series of reports on financing alternatives for child care examines the ways in which communities have begun to involve real estate developers in providing child care. (2nd edition, 1993) ☐ $25 non-member ☐ $15 member

Investing in the Future: Child Care Financing Options for the Public and Private Sectors

Identifies key barriers faced by family day care and center providers to obtaining start-up and operating financing. The report highlights successful financing models, including grants and loans, bank reinvestment strategies, community initiatives, bonds, pension funds, and employer partnerships. (1992) ☐ $25 non-member ☐ $15 member

Insuring Your Future: Liability Insurance and Child Care

Offers child care providers comprehensive information about designing a child care liability insurance package to suit their needs. The Guide describes the types of policies available, profiles 25 insurance companies nationwide that offer liability policies and includes a glossary of insurance terms. (1992) ☐ $25 non-member ☐ $15 member

An Employer's Guide to Child Care Consultants

Guides employers through the search for a child care consultant focusing on: the reasons for using a child care consultant; services that consultants can offer; how to choose the child care consultant that best fits their needs; and resources for locating child care consultants. (1992) ☐ $15 non-member ☐ $10 member

Not Too Small to Care: Small Businesses and Child Care

Profiles 29 small businesses (employing under 250 workers) that have implemented child care benefits: on- or near-site child care centers, employee subsidies, flexible work hours, parental leave, family day care homes and Dependent Care Assistance Plans. (1991)
☐ $25 non-member ☐ $15 member

Making the Connections: Public-Private Partnerships in Child Care

Highlights 20 successful and innovative partnerships for child care between private business, voluntary organizations and public agencies. (2nd edition, 1991)
☐ $25 non-member ☐ $15 member

Child Care Currents

Provides an overview of the child care crisis, including a discussion of demand, marketing, and financing methods for child care. (1990) ☐ $10 non-member ☐ $6 member

Employer Tax Credits for Child Care: Asset or Liability?

Examines the effectiveness of state tax breaks to employers for child care. Includes interviews and the analysis of quantitative data. (1989) ☐ $25 non-member ☐ $15 member

Child Care: The Bottom Line

Focusses on child care as an economic issue. Analyzes the costs and benefits of increased investment in child care by the public and private sectors. (1988)
☐ $25 non-member ☐ $15 member

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